

### The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 1568

1.	Project Title	Hurricane Hardening for First Responders Children's Child Care
2.	Senate Sponsor	Jeff Brandes
3.	Date of Request	12/04/2019
4.	Project/Program Description Construction of hurricane hardening modifications, generators, all connections and electrical work for 2 preschools and 1 administration/headquarters.	

5. State Agency to receive requested funds Department of Education

State Agency contacted? O Yes 

Yes
No

#### 6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

Type of Funding	Amount	
Operations	000	
Fixed Capital Outlay	275,000	
Total State Funds Requested	275,000	

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	275000	100.0 %
Matching Funds		
Federal	00	0 %
State (excluding the amount of this request)	00	0 %
Local	00	0 %
Other	00	0 %
Total Project Costs for Fiscal Year 2020-2021	275,000	100 %

8. Has this project previously received state funding? • Yes O No If yes, provide the most recent instance:

Fiscal Year	Fiscal Year Amount		Specific	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #	Vetoed
2019-20	00	75,000	117	No

9. Is future-year funding likely to be requested? O Yes • No

If yes, indicate nonrecurring amount per year.



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### 10. Details on how the requested state funds will be expended

Spending Category	Description	Amount	
Administrative Costs:			
Executive Director/Project Head Salary and Benefits			
Other Salary and Benefits			
Expense/Equipment/ Travel/Supplies/Other			
Consultants/Contracted Services/Study			
<b>Operational Costs: Oth</b>	er		
Salary and Benefits			
Expense/Equipment/ Travel/Supplies/Other			
Consultants/Contracted Services/Study			
Fixed Capital Construction/Major Renovation:			
Construction/Renovation/ Land/Planning Engineering	Construction of hurricane hardening modifications, generators, all connections and electrical work for 2 preschools and 1 administration/headquarters	275,000	
Total State Funds Re	quested (must equal total from question #6)	275,000	



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#### 11. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

Construction of hurricane hardening modifications, generators, all connections and electrical work for 2 preschools and 1 administration/headquarters

b. What activities and services will be provided to meet the intended purpose of these funds?

Center-based child care will be provided to the children of First Responders working during a local disaster.

c. What direct services will be provided to citizens by the appropriation project?

Center-based child care will be provided for the children of First Responders working during a local disaster. Services will be available

from 7:00 am until 8:00 pm if needed.

d. Who is the target population served by this project? How many individuals are expected to be served?

Preschool students, Grade school students, Children of First Responders working during a disaster. 51-100.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Protect the general public from harm (environmental, criminal, etc.) - Assess children's safety and review any emergency/accident/incident report.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

Reversion of funds.



# 12. The owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

	Same/R'Club Child Care, Inc.		
13.	Requestor Contact	Information	
	a. First Name	Deb	Last Name Ballinger
	b. Organization	R'Club Child Care, Inc.	
	c. E-mail Address	dballinger@rclub.net	
	d. Phone Number	(727)578-5437	Ext.
14.	Recipient Contact I	Information	
	a. Organization	R'Club Child Care, Inc.	
	b. Municipality and	County Pinellas	
	c. Organization Typ	e	
	<ul> <li>For-profit Er</li> </ul>	ntity	
	O Non-Profit 5	601(c) (3)	
	O Non-Profit 5	i01(c) (4)	
	<ul> <li>Local Entity</li> </ul>		
	<ul> <li>University o</li> </ul>	r College	
	Other (please)	se specify)Non Profit 501(c) (4)	
	d. First Name	Deb	Last Name Ballinger
	e. E-mail Address <sub>C</sub>	ballinger@rclub.net	
	f. Phone Number (	727)5785437	
15.	Lobbyist Contact I	nformation	
	a. Name	Laura Boehmer	
	b. Firm Name	The Southern Group	
	c. E-mail Address	boehmer@thesoutherngroup.com	
	d. Phone Number	(727)6860924	Ext.